Image# 201803129096534865 PAGE 1 / 3

#### FEC FORM 2

#### STATEMENT OF CANDIDACY

	me of Candidate (in full)						
	OUNG, DAVID, , ,		1. 16	and the state of		0.0	- Alfin - Alin - Niversia
	dress (number and street) DBOX 123		heck if addre	ss cnanged		2. Candidate's FEC Ide H4IA03115	ntification Number
(c) City	, State, and ZIP Code					3. Is This	ew Amended
	AN METER		IA	5026	1	Statement (N	I) OR (A)
4. Party A	Affiliation	5. Office Soug	ht		6. State & Dist	trict of Candidate	
REPU	JBLICAN PARTY	House			IA	03	
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMMITTEE	
7. I hereb	y designate the following na	med political co	mmittee as n	ny Principal	Campaign Com	mittee for the 2018 (year of elec	election(s).
NOTE:	This designation should be	filed with the ap	propriate offi	ce listed in t	ne instructions.		
` ,	me of Committee (in full) OUNG FOR IOWA	A, INC.					
	dress (number and street) D BOX 162						
(c) City	, State, and ZIP Code						
٧	'AN METER				IA	50261-0162	
candid	y authorize the following nar	(I	ncluding Joir	nt Fundraisin T my princip	g Representativ al campaign cor	•	pend funds on behalf of my
R		SPIRING S	SUCCES	SS & EN	1POWERN	MENT PROJECT	(RISE PROJECT)
	dress (number and street)  BOX 2485						
(c) City	, State, and ZIP Code						
SI	PRINGFIELD				VA	22152	
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct	and complete.
Signature	of Candidate					Date	
Young, Do	avid, , ,			[Elec	tronically Filed]	03/12/2018	
NOTE: Su	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
	1			l	1 1		

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page \_\_\_2 **of** \_3\_\_\_

### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp		
	(a) Name of Committee (in full)		
	DAVID YOUNG VICTORY FUND		
	(b) Address (number and street) PO BOX 225		
	(c) City, State, and ZIP Code		
	VAN METER	IA	50261
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp		
	(a) Name of Committee (in full) PATRIOT DAY II 2017		
	(b) Address (number and street) PO BOX 9891		
	(c) City, State, and ZIP Code		
	ARLINGTON	VA	22219
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campoon (a) Name of Committee (in full)  PROTECT THE HOUSE		
	(b) Address (number and street) PO BOX 30844		
	(c) City, State, and ZIP Code		
	BETHESDA	MD	20824
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp		
	(a) Name of Committee (in full)		
	REPUBLICANS INSPIRING SUCCESS & EMF	POWERM	ENT PROJECT (RISE PROJECT)
	(b) Address (number and street) PO BOX 2485		
	(c) City, State, and ZIP Code		
	SPRINGFIELD	VA	22152

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page \_\_\_3 **of** \_3\_\_\_

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my pr candidacy. <b>NOTE</b> : This designation should be filed with the principal ca			of my
	(a) Name of Committee (in full)			
	DAVID YOUNG VICTORY FUND			
	(b) Address (number and street) PO BOX 225			
	(c) City, State, and ZIP Code			
	VAN METER	IA	50261	
3.	I hereby authorize the following named committee, which is NOT my pr candidacy. <b>NOTE</b> : This designation should be filed with the principal ca		•	of my
	(a) Name of Committee (in full)			
	PATRIOT DAY II 2017			
	(b) Address (number and street) PO BOX 9891			
	(c) City, State, and ZIP Code			
	ARLINGTON	VA	22219	
			LLL 10	
3.	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  PROTECT THE HOUSE	incipal campaigi	committee, to receive and expend funds on behal	of my
3.	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)	incipal campaigi	committee, to receive and expend funds on behal	of my
3.	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal case.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street)	incipal campaigi	committee, to receive and expend funds on behal	of my
3.	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal case.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street) PO BOX 30844	incipal campaigi	committee, to receive and expend funds on behal	of my
	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street) PO BOX 30844  (c) City, State, and ZIP Code BETHESDA  I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)	incipal campaigi ampaign commit MD	committee, to receive and expend funds on behalee.  20824  committee, to receive and expend funds on behale	
	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street) PO BOX 30844  (c) City, State, and ZIP Code BETHESDA  I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full) The Hawkeye Fund	incipal campaigi ampaign commit MD	committee, to receive and expend funds on behalee.  20824  committee, to receive and expend funds on behale	
	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street) PO BOX 30844  (c) City, State, and ZIP Code BETHESDA  I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)	incipal campaigi ampaign commit MD	committee, to receive and expend funds on behalee.  20824  committee, to receive and expend funds on behale	
	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  PROTECT THE HOUSE  (b) Address (number and street) PO BOX 30844  (c) City, State, and ZIP Code BETHESDA  I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal care.  (a) Name of Committee (in full)  The Hawkeye Fund  (b) Address (number and street)	incipal campaigi ampaign commit MD	committee, to receive and expend funds on behalee.  20824  committee, to receive and expend funds on behale	